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COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney Docket No.
F 7575 (V)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FOOD PRODUCT COMPRISING CARTENOIDS

the specification of which (check only one item below):

☐ is attached hereto.

☒ was filed as United States application Serial No. 10/046470 on 02 November 2001 and was amended on _____ (if applicable)

☐ was filed as PCT international application _____ on _____ and was amended under PCT Article 19 on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
EUROPE	00310404.9	23 November 2000	YES

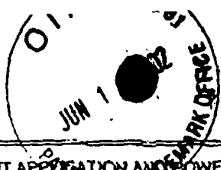
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120.

U.S. APPLICATIONS		STATUS (CHECK ONE)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED

PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

01/04/00



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COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)	Case No. F 7575 (M)
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

CUSTOMER NUMBER: 000201

Direct all correspondence to: CUSTOMER NUMBER 000201

201

FULL NAME OF INVENTOR	FAMILY NAME BODOR	FIRST GIVEN NAME Janos	SECOND GIVEN NAME
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POST OFFICE ADDRESS	POST OFFICE ADDRESS UNILEVER RESEARCH VLAARDINGEN, Olivier van Noortlaan 120	CITY 3133 AT, Vlaardingen	STATE & ZIP CODE/COUNTRY The Netherlands

202

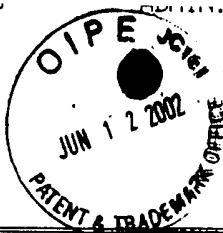
FULL NAME OF INVENTOR	FAMILY NAME GUDE	FIRST GIVEN NAME Michael	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Vlaardingen	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP Germany
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FULL NAME OF INVENTOR	FAMILY NAME PELAN	FIRST GIVEN NAME Edward	SECOND GIVEN NAME G
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POST OFFICE ADDRESS	POST OFFICE ADDRESS Lindendreef 145	CITY 3137 CL Vlaardingen	STATE & ZIP CODE/COUNTRY The Netherlands

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 <i>Janos Bodor</i> Janos BODOR	SIGNATURE OF INVENTOR 202 Michael GUDE	SIGNATURE OF INVENTOR 203 Edward G. PELAN
DATE 31 JANUARY 2002	DATE	DATE



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FULL NAME OF INVENTOR	FAMILY NAME GUDE	FIRST GIVEN NAME Michael	SECOND GIVEN NAME
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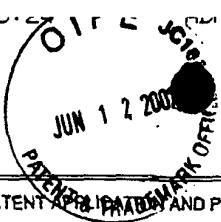
203

FULL NAME OF INVENTOR	FAMILY NAME PELAN	FIRST GIVEN NAME Edward	SECOND GIVEN NAME G
RESIDENCE AND CITIZENSHIP	CITY Vlaardingen	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP Great Britain
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SIGNATURE OF INVENTOR 201 Janos Bodor	SIGNATURE OF INVENTOR 202 Michael Gude 22.1.02	SIGNATURE OF INVENTOR 203 Edward G Pelan
DATE	DATE	DATE

14/04/00



COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Case No. F 7575 (V)

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SIGNATURE OF INVENTOR Janos BODOR	201	SIGNATURE OF INVENTOR Michael GUDE	202	SIGNATURE OF INVENTOR Edward G. PELAN	203
DATE		DATE		DATE 25/01/02	

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CUSTOMER NUMBER: 000201

Direct all correspondence to : CUSTOMER NUMBER 000201

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FULL NAME OF INVENTOR	FAMILY NAME VISSER	FIRST GIVEN NAME Adrianus	SECOND GIVEN NAME
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POST OFFICE ADDRESS	POST OFFICE ADDRESS UNILEVER RESEARCH VLAARDINGEN, Olivier van Noortlaan 120	CITY 3133 AT Vlaardingen	STATE & ZIP CODE/COUNTRY the Netherlands

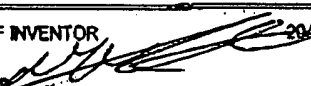
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FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

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SIGNATURE OF INVENTOR Adrianus VISSER 	SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
DATE 31 JANUARY 2002	DATE	DATE

04/04/00